United States Department of the Interior

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EMAIL TRANSMISSION – 5/19/05 Instruction Memorandum No. MT-2005-040

Expires: 9/30/06

In Reply To:

To: State Management Team

From: State Director

Subject: Motor Vehicle Operator Policy

The purpose of this instruction memorandum is to re-establish requirements and provide guidance to ensure that employees safely operate BLM motor vehicles in compliance with 5 CFR 930, Office of Personnel Management; Department Manual Part 485, and BLM Manual Handbook 1112-1. These policies require that agencies establish procedures to adequately control access to motor vehicles.

Scope: This Motor Vehicle Operator Policy applies to all BLM employees, contractors and volunteers who operate Government-owned or -leased motor vehicles; or privately-owned motor vehicles on official business for the BLM.

Responsibilities:

Management is responsible to establish minimum requirements and provide guidance to ensure that employees safely operate all BLM motor vehicles. Specifically, management will establish a point of contact to ensure that each employee assigned to operate a Government vehicle possesses a valid driver's license with the state of residence. Managers will ensure that all fleet vehicles are inspected and maintained in a safe, operable condition and provide for thorough investigation of all motor vehicle accidents should they occur.

First-line supervisors must ensure that an employee has the ability to operate the assigned vehicle safely and that all established safe driving practices are followed. The authorization process for an employee to drive on official business must be initiated, reviewed and documented by the supervisor when the employee starts to work and on the anniversary renewal date of the employee's state driver's license.

Supervisors are responsible to continuously evaluate the performance of employees in the operation of motor vehicles. Supervisors are required to initiate action to revoke or suspend the Government driving authorization of any employee who fails to meet acceptable standards for safe driving conduct. Human Resources staff should be contacted if the loss

of a valid state driver's license impacts the employee's ability to successfully perform critical job duties.

Employees have the responsibility to possess a valid state license for the class of vehicle being operated. The employee must immediately notify the supervisor if his/her license is suspended, revoked, or not renewed. Employees must also:

- Know and observe all state and local traffic regulations and licensing requirements
- Notify the supervisor of any physical, mental, or emotional condition that might impair their ability to safely drive a motorized vehicle
- Possess a safe driving record
- Drive safely, operate the vehicle within mechanical limits and ensure that all passengers, including themselves, use seat belts while the vehicle is in motion
- Possess and carry a valid BLM identification card while driving a government-owned or leased vehicle
- Complete defensive driving and specialized equipment training requirements

The State Safety Specialists serve as points of contact with the State Department of Motor Vehicles to ensure that each driver/vehicle operator possesses a valid State driver's license. The Safety Specialists and the Field Office Collateral Duty Safety Officers may be contacted for defensive driving or 4x4 training material, or to schedule facilitated sessions as needed.

Procedures:

Upon initial hire, transfer, or the anniversary date of their State driver's license, the employee will receive form MT-1112-13, Motor Vehicle/Special/Equipment Authorization (Attachment 1). This form must be completed by all employees (regular, contracted or volunteer) prior to being authorized to drive any government-owned or —leased vehicle or privately-owned vehicle to be used for official business. The purpose for the periodic review and renewal is to allow the BLM to determine that the employee is medically qualified and continues to demonstrate competency based on a safe driving record. The form will be submitted to the employee's supervisor for review and approval. The completed form, with training certificate(s) and/or the appropriate checklist(s) showing the results of the proficiency field check, will be sent to the State Safety Specialists (MT-930). The State Safety Specialists will obtain the employee's driving record history from the State Department of Motor Vehicles. This information will be retained in the employee's Official Personnel File.

The State Safety Specialists will issue form OF-346, "U.S. Government Motor Vehicle Operator's Identification Card" to employees who will operate specialized equipment. Seasonal employees, contractors and volunteers who are not issued a BLM identification card and must operate a government vehicle will also be issued this form.

Training:

Each employee is required to complete a defensive driving course prior to operating a vehicle in the performance of assigned duties. Eligibility to drive is maintained by completing a driver improvement refresher course every 3 years. Employees who intend to drive a 4x4 vehicle off established roads must also complete a 4x4 training course and demonstrate his/her 4x4 proficiency to another competent 4x4 operator. The proficiency test for 4x4 operators may be waived if the employee has documentation of initial 4x4 training at another agency or Field Office and continues to demonstrate competency through a good driving record.

Employees who will operate other specialized equipment, i.e., all terrain vehicle, backhoe, forklift, snowmobile, motorboat, dozer, must receive training appropriate for its use and demonstrate his/her proficiency to the instructor, or designated examiner. Contact the State Safety Specialists or the Field Office Collateral Duty Safety Officer for information on the frequency of refresher training for specialized equipment.

Documentation of training is kept by the supervisor and training dates are noted on the form MT-1112-13. A copy of the training is also sent to the Field Office Collateral Duty Safety Officers or to the State Safety Specialists (MT-930) for updating the Safety training database, which serves as a secondary record system for training documentation.

The State Safety Office and Field Office Collateral Duty Safety Officers schedule defensive driver training opportunities for employees. Self-study training materials are available from the State Safety Specialists.

You may contact Karilynn Volk at 406-896-5190, if you have questions or need assistance implementing this program in your office.

Signed by: Martin C. Ott

Authenticated by: Laura Schmier (MT-932)

1 Attachment 1-Form MT-1112-13 (2 pp)

<u>Distribution</u> w/attm. Assistant Field Manager, Glasgow Field Station Assistant Field Manager, Havre Field Station (MT-922), Don Judice (WO-740), Sandy Guches, MIB, Room 2044

U.S. Department of the Interior Bureau of Land Management Montana State Office

MOTOR VEHICLE/SPECIAL EQUIPMENT AUTHORIZATION

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Applica	nt's Nar	ne	Title		Office Code					
Sex		Date of Birth	Color of Hair	Color of E	Eyes	Height		Weight	Social Security Number	
Types of	vehicle	es/special equipment y	ou request auth	orization to o	perate (pa	sseng	er, light	trucks, etc.):	•	
				CURRENT	DRIVER'S	S LICE	NSE			
Number State							sued	Date Expires		
Type/Class of state license held and any restrictions					Is your current license valid in the state where you are domiciled? Yes No					
Severe _l	oenaltie	es are provided for und	official use of go		NT - PLEA			31 U.S.C. 638 A(c)(2)	as follows:	
other that	an offici ed, with	al purposes or otherw	ise violates the	provisions of	this paragı	raph s	hall be s	uspended from duty b	notor vehicle or aircraft, for y the head of the department nmarily removed from office if	
except ir	cases		ees engaged in	filed work the					es and places of employment portation necessary and such	
				PHYSICA	L FITNESS	INQU	IRY			
Have yo	u ever l	nad or do you now hav	e (place check a	at left of each	item):					
Yes	No					Yes	No			
		Poor vision in one	or both eyes					Arthritis, rheumati	sm, swollen or painful joints	
		Eye disease						Loss of hand, arm,	foot, or leg	
	Poor hearing in one or both ears							Deformity of hand,	arm, foot, or leg	
		Diabetes						Nervous or mental	trouble of any kind	
		Palpitation, chest p	oain, or shortn	ess of breat	h			Blackouts or epile	osy	
		Dizziness or faintin	g spells					Sugar or albumin i	n urine	
		Frequent or severe	headaches					Excessive drinking	habit (alcohol)	
		High or low blood p	oressure					Other serious defe	cts or diseases	
		Drug or narcotic ha	abit							
If your a	nswer i	s "Yes" to one or more	of the above qu	uestions, expla	ain fully in	this sp	ace, inc	icating date of origina	ll condition and current status	
(a) Do yo	ou wear	glasses (or contact le	enses) while driv	ring?Y	es	No				
(b) Do y	ou wear	a hearing aid?		Yes	s <u></u> 1	No				
physical f	itness of	Federal employees whos	e regular jobs are	not driving or u	ısing govern	ment-c	wned mo	tor vehicles or specialize	. This form is used to ascertain the d equipment. Based on the government-owned equipment.	
of my elig	at my ar ibility or	my dismissal from the ser	vice and is punish	able by law. I a	Iso certify t	hat I wi	ll comply	with the rules and regula	ion may be grounds for cancellation tions governing the use of d or revoked.	
government-owned and leased motor vehicles and equipment. I will inform Signature of Applicant							Date			

MT-1112-13 (July 1997)

TO BE COMPLETED BY SUPERVISOR										
Types of vehicles/special equipment authorized to operate:										
Passenger Vehicle:	15 passer	nger & under	*over 15 passengers							
Truck Type: Size:	2 x 44 x 4 under 26,000 GVWR		Drill Truck *over 26,000 GVWR							
Trailer Towing:	under 10,	000 GVWR	*over 10,000 GVWR							
*Hazardous Material Endors	rsement: *Motorcycl		**4-Wheeled	ATV:						
Backhoe:	Forklift:	Snowmobile:	Motorboat:	:						
Bulldozer: Other Vehicles or Equipment										
(specify):*Must conform with applicable state laws for licensing; no checklist is required for these. **Must have ATV or motorcycle endorsement if operated on public roads; checklist is required.										
Restrictions (no off-road use of 4x4, etc.):										
The applicant is authorized to operate a government-owned or leased vehicle or special equipment while in the performance of his/her official duties, provided he/she has a valid state driver's license in possession at all times while driving.										
I certify that I have reviewed available fitness information regarding the physical condition of the applicant and that I have determined there is no information on this form or otherwise available to indicate that the applicant should be referred for physical examination.										
Signature of Supervisor		Title		Date						
TO BE COMPLETED BY EXAMINER/SUPERVISOR										
Types of Vehicle/Special Equipme	nt	PassedWaived (compete previous experience a	Failed ency demonstrated by end/or training)	Date of Proficiency Test/Training						
Comments:										
Signature of Examiner/Supervisor		Title		Date						

ATTACH APPROPRIATE CHECKLIST FOR NEW AUTHORIZATIONS. ROUTE THROUGH SAFETY OFFICER. FILE IN OPF.